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Application No: 10/645,281 Filing Date: August 21, 2003

Title: Non-Aqueous Release From Paper Machine Equipment

Attorney Docket: 10159-RE (HPC-100US)

Transmittal Form

• Petition For One Month Extension Of Time

• Fee Transmittal

Amendment and Response to September 24, 2004 Non-Final OA

Receipt Card

lease type a plus sign (+) inside this box A TRADENA

PTO/SB/21(08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Jotal Number of Pages in This Submission

**Application Number** 10/645,281 Filing Date August 21, 2003 First Named Inventor Jacqueline K. Pease Group Art Unit 1731 **Examiner Name** Peter Chin Attorney Docket Number

Total Number of Pages	9	Attorn	ey Docket Number	10159-RE (HPC-100US)				
ENCLOSURES (check all that apply)								
⊠ Fee Transmittal Form		Assignment Papers (for an Application)			After Allowance Communication to Group			
Fee Attached		☐ Drawing(s)			Appeal Comn	nunication to Board of Interferences		
Amendment / Res	sponse	Licensir	ng-relate	d Papers		nunication to Group Brief, Reply Brief)		
After Final Affidavits/dec	laration(s)	Petition			Proprietary Information			
Extension of Time	e Request 1 month	Petition to Convert to a Provisional Application			Status Letter			
Express Abandonment Request				ey, Revocation espondence Address	Other Enclosu			
Information Disclo	osure Statement	Terminal Disclaimer				tificate of Mailing		
Certified Copy of Priority Document(s)		Request for Refund			• Rec	eipi Caru		
Response to Missing Parts/ Incomplete Application		CD, Number of CD(s)						
Response to Missing Parts under 37 CFR 1.52 or 1.53		Remar	ks					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						=		
Firm or Individual name Thomas R. Mancini,		i, Reg. 50,157						
Signature		Ho		<u></u>				
Date	January 24, 2005							
CERTIFICATE OF MAILING								

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Date January 24, 2005

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Complete if Known				
Application Number	10/645,281			
Filing Date	August 21, 2003			
First Named Inventor	Jacqueline K. Pease			
Examiner Name	Peter Chin			
Group / Art Unit	1731			
Attorney Docket No.	10159-RE (HPC-100US)			
	Filing Date First Named Inventor Examiner Name Group / Art Unit			

Check	METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)					
Fee	Check Credit card Money Order Other None								
Deposit   Account   Number	⊠ Denosit Account:					<del></del>		Fee	
Account   Potter Anderson & Corroon LLP   139   130								Fee Description	
Dappeding   Potter Anderson & Corroon LLP   137   50   227   250   50   50   50   50   50   50   5	Deposit Account 501447								
Account Name	Number			127	50	227	25		
Name		Bottor Anderson & Correct I I E	,					• •	
Charge fee(s) indicated below   Credit any overpayments		Foller Anderson & Corroon LLF			•		•	-	
Charge series and additional feets) during the perdency of this application   115 120   215 60   225   Extension for reply within first month   120.00	The Commissione	r is authorized to: (check all that apply)		112	920*	112	920*		
Substitution   Subs	_ • •	<del></del> · ·	•	113	1,840*	113	1,840*		
BASIC FILING FEE   FEE CALCULATION   116   450   216   225		.,		115	120	215	60	Extension for reply within first month	120.00
1				116	450	216	225	Extension for reply within second month	
1. BASIC FILING FEE   Large Entity   Small Entity		EEE CALCULATION		117	1020	217	510	Extension for reply within third month	
Small Entity   Small Entity   Fee   Fee   Fee   Fee   Fee   Gode   (5)   Fee Pald   119   500   219   250   Notice of Appeal   19   19   100   220   250   Filing a brief in support of an appeal   19   100   1				118	1,590	218	795	Extension for reply within fourth month	
Fee						ì	•	* *	
Code   (\$)   Code   (\$)   Code   (\$)   Fee Paid   121   1000   221   500   Request for oral hearing   121   1000   221   500   Request for oral hearing   121   1000   122   500   Request for oral hearing   123   138   1,510				119	500	219	250	Notice of Appeal	
101   1000   201   500   Utility filing fee   121   1000   221   500   Request for oral hearing   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   1000   121   121   121   121   1000   121   1			ion Baid			1			
106   430   206   215   Design filing fee   140   500   240   250   Petition to revive – unavoidable   141   1,500   242   750   Petition to revive – unavoidable   142   1,400   242   750   Petition to revive – unavoidable   141   1,500   241   750   Petition to revive – unavoidable   142   1,400   242   750   Petition to revive – unavoidable   142   1,400   242   750   Petition to revive – unavoidable   143   800   243   400   Design issue fee   144   100   244   550   Plant issue fee   144   100   244   550   Plant issue fee   144   100   244   550   Plant issue fee   144   100   244   100   Processing fee under 37 CFR 1.17(q)   145   Processing fee   14			ee raiu	121	1000	221	500	•	
108	106 430	206 215 Design filing fee		138	1,510	138	1,510		
114 200 214 100 Provisional filling fee SUBTOTAL (1) (5) 0 143 800 243 400 Design issue fee 143 800 244 550 Plant issue fee 150 Plant issue fee 164 165 Plant issue fee 172 130 Petitions to the Commissioner 172 130 Petitions to the Commissioner 172 130 Petitions to the Commissioner 173 50 123 50 Processing fee under 37 CFR 1.17(q) Submission of Information Disclosure 173 50 123 50 Processing fee under 37 CFR 1.17(q) Submission of Information Disclosure 174 140 581 40 Recording each patent assignment per property (times number of properties) Plant issue fee 174 150 Plan				140	500	240	250	Petition to revive – unavoidable	
SUBTOTAL (1) (\$) 0				141	1,500	241	750	Petition to revive – unintentional	
SUBTOTAL (1)   (\$) 0	114 200	214 100 Provisional filling fee		142	1,400	242	700	Utility issue fee (or reissue)	
2. EXTRA CLAIM FEES    Extra		<u> </u>		1				•	
2. EXTRA CLAIM FEES  Total Claims		SUBTOTAL (1) (\$) 0							
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Independent Claims  -3 = X 200 = 0  Multiple Dependent  Large Entity Small Entity  Fee Fee Code (\$) Code (\$) Claims in excess of 20 Independent claims in excess of 30 Independent claims in excess of 20 Independent claims in excess of 20 Independent claims over original patent  SUBTOTAL (2) (\$) 0  Multiple Dependent  X 360 = 0  X 200 = 0  X 360 = 0  X 395 For each additional invention to be examined (37 CFR § 1.129(a))  (RCE)  (RCE)  (RCE)  169 900 169 900 Request for expedited examination of a design application  Other fee (specify)  SUBTOTAL (2) (\$) 0	Total Claims	Claims below	Paid	126	180	126	180		
Multiple Dependent  Large Entity   Small Entity    Fee   Fee   Code   (\$)    102   200   202   100   Independent claims in excess of 3    104   360   204   180   Multiple dependent claims in excess of 20    109   200   209   100   Reissue independent claims over original patent    SUBTOTAL (2)   (\$) 0	Independent			581	40	581	40		
Dependent  Large Entity  Small Entity  Fee Fee Code (\$)  103 50 203 25 Claims in excess of 20 102 200 202 100 Independent claims in excess of 3 104 360 204 180 Multiple dependent claims in excess of 3 109 200 209 100  The Reissue independent claims in excess of 20 and over original patent  SUBTOTAL (2)  Small Entity  149 790 249 395 For each additional invention to be examined (37 CFR § 1.129(b))  179 790 279 395 Request for Continued Examination (RCE)  169 900 169 900 Request for expedited examination of a design application  Other fee (specify)  SUBTOTAL (2)  (\$) 0	_			146	790	246	395		
Fee Code (\$) Fee Description  103 50 203 25 Claims in excess of 20 102 200 202 100 Independent claims in excess of 3 104 360 204 180 Multiple dependent claims over original patent  109 200 209 100 Substitute (\$) 0 210 25 S	Dependent L		= 0	149	790	249	395		
Code (\$) Code (\$)  103 50 203 25 Claims in excess of 20 102 200 202 100 Independent claims in excess of 3 104 360 204 180 Multiple dependent claims over original patent  110 50 210 25 SUBTOTAL (2) (\$) 0		For For		179	790	279	395		
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**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 120.00	SUBTOTAL (2) (\$) 0								
	**or number previously paid, if greater; For Reissues, see above		*Reduc	ed by Ba	ısic Filinç	g Fee Pai	d SUBTOTAL (3) (\$) 120.00		

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	Thomas R. Mancini	Registration No. Attorney/Agent)	50,157	Telephone	(302) 984-6127		
Signature	Mark	· · ·	· · · · · · · · · · · · · · · · · · ·	Date	January 24, 2005		